

**CHRISTINA L. ARCHER**  
**DIRECT DIAL: (314) 516-2606**  
**DIRECT FAX: (314) 345-4792**  
**E-MAIL: CLA@greensfelder.com**

*E 6 3/30/05 Bill. FRI / copy a/bw sent to OSC.*  
Greensfelder, Hemker & Gale, P.C.  
2000 Equitable Building  
10 South Broadway  
St. Louis, MO 63102

12 Wolf Creek Drive  
Suite 100  
Belleville (Swansea), IL 62226

T: 314-241-9090  
F: 314-241-8624  
www.greensfelder.com

March 30, 2005

EPA Region 5 Records Ctr.



284476

Tom Turner  
Associate Regional Counsel  
U.S. EPA, Region 5  
Office of Regional Counsel (C-14J)  
77 West Jackson Blvd.  
Chicago, IL 60604

**Re: Allied Healthcare Products, Inc.**  
**RRG/Clayton Chemical Superfund Site**

Dear Mr. Turner:

This letter sets forth Allied Healthcare Products, Inc.'s ("Allied") position regarding its status as a Potentially Responsible Party ("PRP") for the soil removal at the RRG/Clayton Chemical Superfund Site in Sauget, Illinois ("Site"). By way of background, Allied received the November 22, 2004 General Notice of Potential Liability letter related to the Site. Allied responded to U.S. EPA on January 28, 2005 as part of a preliminary PRP Group member indicating its willingness to investigate the issues contained in the General Notice letter. Allied has now reviewed all known information, and believes it should not be included PRP for the soil removal at the Site.

We understand that U.S. EPA relied upon "The RRG/Clayton Liquid Removal, Investigation Report" ("Report") to determine which PRPs received the General Notice letter. U.S. EPA based the cutoff for receipt of the General Notice letter at 75,000 gallons.

According to the Report, Allied shipped 83,614 gallons to the Site from 1980 to 1983. There is no indication from the Report that Allied shipped anything to the Site from 1984 through 1998. The breakdown is as follows:

Year	Amount Shipped (gallons)
1980	43,764
1981	35,170
1982	4,330
1983	350

It is our understanding that the PRPs performing the liquid removal at the Site scanned Clayton Chemical's annual reports of waste received by the facility from 1979 through 1998 and used this information in support of the conclusions contained in the Report. Allied has reviewed all of that documentation as well as its own internal documentation. Attached hereto are copies of every invoice indicating that Allied shipped waste solvent/oil to the Site found from Clayton and Allied records. The breakdown is as follows:

Date	Manifest Number	Location	Amount of Solvent Shipped (gallons)
3/18/81	0362186	Clayton	2,300
10/1/81	0350379	Clayton and Allied	1,780
<u>1981 Subtotal</u> <sup>1</sup>			<u>4,080</u>
4/2/82	0613958	Allied	1,500 (waste oil)
6/24/82	0613962	Allied	850
9/15/82	0613964	Allied	900
12/13/82	0613987	Allied	700
<u>1982 Subtotal</u>		Clayton	<u>3,950</u>
3/9/83	0613968	Clayton and Allied	350
<b>Total</b>			<b>8,380</b>

As is apparent from the attached manifests and the above-referenced charts, there is a discrepancy of 43,764 gallons in 1980 (the Report states that Allied shipped 43,764 gallons and Clayton and Allied records show nothing was shipped) and 31,090 gallons in 1981 (the Report states that Allied shipped 35,170 gallons and Clayton and Allied records show 4,080 gallons were shipped). Allied and Clayton records match for the years 1982 and 1983. As stated above, there is no indication from any applicable records that Allied sent any waste solvent/oil to the Site from 1984 through 1998.

Allied believes that the Report is inaccurate in the amount of waste solvent/oil shipped to the Site from 1980 and 1981. Both Clayton and Allied records support only the conclusion that Allied shipped 8,380 gallons of waste solvent/oil to the Site from 1981 through 1983. Based on such, it is Allied's position that it should not have been included as a PRP at the Site as its amount of waste solvent/oil shipped was well below the 75,000 gallon cut-off.

<sup>1</sup> Clayton's records contain three copies of manifests 0350379 and 0362186.

If you have any information which contradicts the above, please do not hesitate to contact me at 314-516-2606 or Al Henneboehle at 314-516-2601. Otherwise, Allied will not participate in any further PRP negotiations for the soil removal at the Site based on the above information.

Sincerely,

GREENSFELDER, HEMKER & GALE, P.C.

By

  
Christina L. Archer

Enclosures

cc: Al Henneboehle  
Eldon Rosentrater  
Margaret A. Coughlin

TO BE COMPLETED BY  
WASTE GENERATOR

STATE OF ILLINOIS  
ENVIRONMENTAL PROTECTION AGENCY  
DIVISION OF LAND POLLUTION CONTROL  
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706  
(217) 782-6760

0362186

SHIPMENT # 001

ALLIED HEALTH CARE

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998960

CHEMTRON MEDICAL DIV  
(Company Name)

1801 Lilly  
Address

MO # 01010

ILL 9291890102  
Generator Number

Fed MOD000603472

ST LOUIS  
City

MO  
State

63110  
Zip

WASTE HAULER(S)

Schiber Truck Co  
Hauler Name

HARTFORD ILL  
Hauler Address

S.W.H. Registration Number 2025002

MO # T-44121  
FED ILD006493191

S.W.H. Registration Number

Hauler Name

Hauler Address

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

CLAYTON CHEMICAL  
(Facility Name)

NO-1 Mobile DRIVE  
Address

16312104  
Site Number

SAUSET  
City

ILL  
State

62201  
Zip

066918327

TO BE COMPLETED BY  
WASTE GENERATOR

WASTE NAME: WASTE SOLVENT

WASTE PHASE: Liquid  
(Liquid, Gaseous, Solid)

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE SOLVENT NOS FLAMMABLE

WEIGHT FOR D.O.T. USE 17,250  
TMS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE  
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 002300

1 GALLONS (Circle One)  
CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 3-18-81

Joseph Louie  
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Tom Rhodes  
(Authorized Signature)

DATE: 03/18/81

(2)  
(Authorized Signature)

DATE: / /

DISPOSAL, STORAGE, OR TREATMENT FACILITY\*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

David L. Whetson  
(Authorized Signature)

DATE: 03/18/81

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

Tank 21 -> Luwa

SITE COPY - PART 3

TO BE COMPLETED BY  
WASTE GENERATOR

STATE OF ILLINOIS  
ENVIRONMENTAL PROTECTION AGENCY  
DIVISION OF LAND POLLUTION CONTROL  
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706  
(217) 782-6760

Shipment # 002  
0350379

Allied Health Care

SPECIAL WASTE HAULING MANIFEST

Authorization Number 998960

Chemical Med. Lab Div 1801 2114

MO #01010  
Ill

Generator Number 9291890103

City

State

Zip

Fed # 000603422

WASTE HAULER(S)

Bliss Co Inc Ellettsville MO

S.W.H. Registration Number 0186005

527-6666

MO 13-1010

Hauler Name

Hauler Address

S.W.H. Registration Number 0123212

DESTINATION - DISPOSAL STORAGE OR TREATMENT SITE

Clayton Chemical #1 mobile Drive

16312104

Sanger

Ill

62201

026918327

TO BE COMPLETED BY  
WASTE GENERATOR

WASTE NAME: WASTE SOLVENT

WASTE PHASE: Liquid

THE SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE SOLVENT NOS FLAMMABLE

WEIGHT FOR D.O.T. USE LBS TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE  
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 001780

GALLONS (Circle One)  
CU. YDS.

METHOD OF SHIPMENT (Circle One)

DRUMS

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED SPECIAL WASTE IS PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE DEPARTMENT OF TRANSPORTATION.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

DATE: 10-1-81

Joseph J. Loman  
(Authorized Signature)

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jay Lovett  
(Authorized Signature)

DATE: 10-11-81

(2) \_\_\_\_\_  
(Authorized Signature)

DATE: \_\_\_\_\_

DISPOSAL, STORAGE, OR TREATMENT FACILITY\*

HAZARDOUS WASTE SUBJECT TO FEE YES NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED SPECIAL WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Dave W. Waters  
(Authorized Signature)

DATE: 10-11-81

COMMENTS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

OUTSIDE ILLINOIS: 800 / 424-8802

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART - 6 GENERATOR

SITE COPY - PART 3

**This report is for the calendar year ending December 31, 1982.**

VII. GENERATOR'S USEPA I.D. NO. 11010101016103472 VIII. GENERATOR'S ILLINOIS EPA I.D. NO. 19219118191011023 IX. FACILITY'S USEPA I.D. NO. IK101616191181217

[illegible]

XIV. PAGE NUMBER

= Received signed agreement

1982

Chlor  
Non Chlor

IEPA AUTHORIZATION LIST

AB Chance	9-24-85	922475, 922477
Airtex Products	8-20-85	991350
12-13 Allied Healthcare-Chemtron 1500-85010-31-85900	10-31-85	998960, 9700
Almar Industries	11-1-85 8-13-85 8-16-85	991269, 992431 992432 992361
5-19-81 Aluminum Industries 1760	8-13-85	998358
<del>American Air Filter (ENGINEERED AIR SYSTEMS)</del>	6-21-85	921932
American Can Co. American Device Company	12-22-85	923258 991356
American Stamp & Marking	10-28-85	922667
AMF Wheel Goods	9-1-85	993037
Amoco Oil Company	9-29-82	994483
AP Green	12-30-84	996157
Arrow Group Industries	10-15-85	922887
Baldor Electric 1430 555	7-2-85	921991
B & C Auto Body (Nobbe)	8-13-85	992969
Banner Paints	10-12-85	997083, 997876
2-28-82 Bemis 3500-5200-4500-4300-4200-4600 4500-4800	8-13-85	992600
Bliss Waste Oil	9-22-85	994342
Boben Mfg. (CHONTI/THRU)	11-30-85	923213
Brasch Manufacturing	10-13-85	998985
9-24-82 Brod-Dugan 1750-3800-2200	11-1-85	991587
Brown Shoe	11-2-85	997088
Bunn-O-Matic	11-12-85	923079

1982

	% of Chlo.	Chlao.	Other	Total	%
Allied Healthcare - Chemtron			1500	39.50	
			850		
			900	(37) .60	
			700		
			<u>3950</u>		
			(30) .73		
Aluminum Industries			1760		
			(44) .33		
Baldor Elec.	1.21	(13) 1430	555	1,985	
			(60) .10	(54) .30	
Bemis			3500	35,600	
			5200	(5) 5.42	
			4500		
			4300		
			4200		
			4600		
			4500		
			<u>4800</u>		
			35600		
			(4) 6.61		
Brod-Hugan			0.1750	7,750	
			3800	(19) 1.18	
			<u>2200</u>		
			7750		
			(15) 1.44		
Bussmann		440	275	1,760	
		385	.05	(57) .27	
		<u>660</u>			
		1485			
	1.26	(12)			
		2.915	49890	51.045	



PC 602.6/01  
TO BE COMPLETED BY  
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY  
DIVISION OF LAND POLLUTION CONTROL  
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706  
(217) 782-6760

SPECIAL WASTE HAULING MANIFEST

Allied Health CARE

HEMEXON

1720 Sablette 771 2400

0613967  
#045  
998960  
Authorization Number

(Company Name)

Address

Phone Number

14

Generator Number

24

ST Louis

City

MO

State

63110

Zip

MO 20-01010

EPA Number

WASTE HAULER(S)

MO WASTE #001

Bliss Oil Co

Hauler Name

Box 37

STRECKER RD

Hauler Address

Ellisville MO 527 6666

Phone Number

S.W.H. Registration Number

0186005

25

MO 0052623717

EPA Number

MO Hauler #1010

S.W.H. Registration Number

26

MO 0052623717

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

CLAYTON CHEMICAL

(Facility Name)

#1 Mobile Drive

Address

16312104

39

Site Number

SAGET

City

IL

State

61201

Zip

Phone Number

160066918327

EPA Number

Alternate (Facility Name)

Address

39

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY  
WASTE GENERATOR

WASTE NAME: WASTE SOLVENT

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE SOLVENT FLAMMABLE

NA

UN or NA Number

NA

EPA HW Number

WEIGHT FOR  
D.O.T. USE

LBS

TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE  
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000850

GALLONS (Circle One)  
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS Number)

TANK TRUCK

OPEN TRUCK

OTHER (Specify)

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

Joseph J. Loun

(Authorized Signature)

DATE: 6-24-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jay Lovett

(Authorized Signature)

DATE: 6/24/82

(2)

(Authorized Signature)

DATE: 6/24/82

DISPOSAL, STORAGE, OR TREATMENT FACILITY:

HAZARDOUS WASTE SUBJECT TO FEE YES NO

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Jim Stokes

(Authorized Signature)

DATE: 7/29/82

REMARKS OR SPECIAL INSTRUCTIONS:

This manifest was received 6/24/82! In my absence, Jim Stokes (plant employee) signed & dated in error. - David L. Winters 8/10/82

IN ILLINOIS: 217 / 782-3637

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-267

DISTRIBUTION: PART - 1 GENERATOR

PART - 2 IEPA

PART - 3 SITE

PART - 4 HAULER

PART - 5 IEPA

PART 6 - GENERATOR

REV. # 4

SITE COPY - PART 3

**TO BE COMPLETED BY  
WASTE GENERATOR**

ENVIRONMENTAL PROTECTION AGENCY  
DIVISION OF LAND POLLUTION CONTROL  
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706

(217) 782-6760

**SPECIAL WASTE HAULING MANIFEST**

0613964

Authorization Number 998960

Allied Health Care

1801 Lilly

Hemetron

1720 Sublette

314-771-2400

9291890102

(Company Name)

Address

Phone Number

14

Generator Number

24

ST Louis

MO

63110

MO D0000603472

City

State

Zip

MO-ID-01000 EPA Number

WASTE HAULER(S)

MO WASTE #001

Bliss Oil Co Box 37 Strecker Rd

S.W.H. Registration Number 0186005

Hauler Name

Hauler Address

Ellisville MO

314-527-6666

MO D0052623717

Phone Number

EPA Number

MO Hauler #1010

S.W.H. Registration Number

32

38

Hauler Name

Hauler Address

Phone Number

EPA Number

**DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE**

Clayton Chemical #1 Mobile Drive

16312104

(Facility Name)

Address

39

Site Number

46

Saugt

IL

62501

160066918327

City

State

Zip

Phone Number

EPA Number

Alternate (Facility Name)

Address

39

Site Number

46

City

State

Zip

Phone Number

EPA Number

**TO BE COMPLETED BY  
WASTE GENERATOR**

WASTE NAME: WASTE SOLVENT

WASTE PHASE: Liquid

(Liquid, Gaseous, Solid)

SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE SOLVENT FLAMMABLE

NA

UN or NA Number

NA

EPA HW Number

WEIGHT FOR  
D.O.T. USE

LBS  
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE  
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000900 \* 1 GALLONS (Circle One)  
2 CU. YDS.

METHOD OF SHIPMENT (Circle One)

(DRUMS \_\_\_\_\_)  
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify) \_\_\_\_\_

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

x Dan Bailey  
(Authorized Signature)

DATE: x 9/15/82

**WASTE HAULER**

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) Jay Covert  
(Authorized Signature)

DATE: 9/15/82

(2) \_\_\_\_\_  
(Authorized Signature)

DATE: \_\_\_\_\_

**DISPOSAL, STORAGE, OR TREATMENT FACILITY\***

HAZARDOUS WASTE SUBJECT TO FEE YES \_\_\_\_\_ NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

Ron Covert  
(Authorized Signature)

DATE: 9/15/82

REMARKS OR SPECIAL INSTRUCTIONS:

IN ILLINOIS: 217 / 782-3637

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2675

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART 6 - GENERATOR

REV. # 4

GENERATOR COPY — PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

This Agency is authorized to require this information under Illinois Revised Statutes, 1979, Chapter 111 1/2, Section 22. Disclosure of this information is required. Failure to do so may result in a civil penalty up to \$10,000.00 and an additional civil penalty up to \$1,000.00 and imprisonment up to one year. This form has been approved by the Forms Management Center.

TO BE COMPLETED BY  
WASTE GENERATOR

ENVIRONMENTAL PROTECTION AGENCY  
DIVISION OF LAND POLLUTION CONTROL  
2200 CHURCHILL ROAD, SPRINGFIELD, ILLINOIS 62706  
(217) 782-6760  
SPECIAL WASTE HAULING MANIFEST

U013301

Authorization Number 998960

Allied Health Care  
Products  
Hemetron  
Medical Div  
(Company Name)

1720 Sublette 314-7712402 9291890102  
Address Phone Number Generator Number

ST Louis mo 6310 MO WASTE # 001 MOD0000603472  
City State Zip MO # EPA Number

WASTE HAULER(S)

Bliss Oil Co Box 37 Streetek Rd  
Hauler Name Hauler Address

S.W.H. Registration Number 0186005

Ellisville mo 3145276666 MOD052633717  
Phone Number MO Hauler # EPA Number

S.W.H. Registration Number 32

Hauler Name Hauler Address

Phone Number

EPA Number

DESTINATION — DISPOSAL STORAGE OR TREATMENT SITE

CLAYTON CHEMICAL #1 mobile DRIV  
(Facility Name) Address

MO RR-001  
16372104  
Site Number

SAUGET ILL 62201 6832710467 160066918327  
City State Zip Phone Number EPA Number

Alternate (Facility Name)

Address

Site Number

City

State

Zip

Phone Number

EPA Number

TO BE COMPLETED BY  
WASTE GENERATOR

WASTE NAME: WASTE SOLVENT

WASTE PHASE: Liquid  
(Liquid, Gaseous, Solid)

SPECIAL WASTE BEING TRANSPORTED UNDER THIS MANIFEST IS OF THE DOT HAZARD CLASSIFICATION INDICATED IMMEDIATELY BELOW:

SHIPPING DESCRIPTION:

HAZARD CLASS:

WASTE SOLVENT FLAMMABLE

NA  
UN or NA Number

NA  
EPA HW Number

WEIGHT FOR  
O.O.T. USE        LBS  
TONS (circle one)

WEIGHT FOR I.E.P.A. USE MUST BE  
CONVERTED TO CU. YDS. OR GAL.

QUANTITY OF WASTE DELIVERED: 000700 1 GALLONS (Circle One)  
CU. YDS. 7

METHOD OF SHIPMENT (Circle One)

(DRUMS       )  
Number

TANK TRUCK

OPEN TRUCK

OTHER (Specify)       

THIS IS TO CERTIFY THAT THE ABOVE-NAMED WASTE ARE PROPERLY CLASSIFIED, DESCRIBED, PACKAGED, MARKED, AND LABELED AND IS IN PROPER CONDITION FOR TRANSPORTATION, IN ACCORDANCE WITH THE APPLICABLE REGULATIONS OF THE ILLINOIS DEPARTMENT OF TRANSPORTATION AND I.E.P.A.

I HEREBY AGREE TO AND CERTIFY THE ABOVE WRITTEN INFORMATION

[Signature]  
(Authorized Signature)

DATE: 12-13-82

WASTE HAULER

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND QUANTITY HAS BEEN ACCEPTED IN PROPER CONDITION FOR TRANSPORT AND I ACKNOWLEDGE THE DESTINATION AS INDICATED:

(1) [Signature]  
(Authorized Signature)

DATE: 12/13/82

(2)         
(Authorized Signature)

DATE:       

DISPOSAL, STORAGE, OR TREATMENT FACILITY\*

HAZARDOUS WASTE SUBJECT TO FEE YES        NO X

I HEREBY CERTIFY THAT THE ABOVE-DESCRIBED WASTE AND INDICATED QUANTITY HAS BEEN ACCEPTED AT THE SITE SPECIFIED ABOVE:

David L. White  
(Authorized Signature)

DATE: 12/13/82

COMMENTS OR SPECIAL INSTRUCTIONS:       

IN ILLINOIS: 217 / 782-3637

\*24 HOUR EMERGENCY AND SPILL ASSISTANCE NUMBERS\*

OUTSIDE ILLINOIS: 800 / 424-8802 or 202 / 426-2671

DISTRIBUTION: PART - 1 GENERATOR PART - 2 IEPA PART - 3 SITE PART - 4 HAULER PART - 5 IEPA PART - 6 - GENERATOR

REV. # 4

GENERATOR COPY — PART 1 - DO NOT REMOVE PART 1 FROM SET UNTIL COMPLETED.

This Agency is authorized to require this information under Illinois Revised Statutes, 1979, Chapter 111 1/2, Section 22. Disclosure of this information is required. Failure to do so may result in a civil penalty up to \$10,000.00 and an additional civil penalty up to \$1,000.00 and imprisonment up to one year. This form has been approved by the Forms Management Center.

This report is for the calibration of counter systems ending 31-1986.

1941

[illegible]